



HOUSE MAJORITY OFFICE

FLORIDA HOUSE OF REPRESENTATIVES



REPRESENTATIVE DANE EAGLE, MAJORITY LEADER

CS/HB 679 Legislative Review of Proposed Regulation of Unregulated Functions

- **CS/HB 679** protects Floridians from burdensome regulations by requiring more careful analysis of new regulatory proposals.
- Sunrise reviews are formal procedures for weighing costs and benefits of new occupational licensing. Current law requires the state to perform a sunrise review for any legislation to regulate an unregulated profession or occupation.
- The bill improves the current sunrise review process by applying the same rigorous analysis for legislation that substantially expands regulation of an already regulated profession or occupation.
- The bill also adds deadlines for submitting information so that the Legislature may complete a timely sunrise review.
- The bill protects Floridians from regulation that cannot be demonstrated to be effective.



CS/HB 7 Direct Health Care Agreements

- **CS/HB 7** expands the scope of direct care agreements beyond primary care.
- The bill creates more opportunities for consumers to directly purchase healthcare services. Current law only addresses agreements for primary care services. This bill provides greater autonomy to patients to choose how they receive and pay for their care, and allows providers an opportunity to provide patient-focused care.
- The bill authorizes patients to enter into a “Direct Health Care Agreement” with any health care provider for any health care services they offer within the scope of their professional license. Under the bill, direct health care agreements will still have the same contract requirements as direct primary care agreements and will also receive the same regulatory exemptions from insurance regulations.
- This bill ensures that these patient-provider agreements are not treated like insurance and will not be regulated by the Office of Insurance Regulation.
- Patients and primary care providers should have the ability to contract for the amount and scope of care that suits their needs. This bill empowers patients with greater choice and flexibility in how they receive and pay for their health care.



CS/CS/HB 319 Patient Safety and Quality Measures

- **CS/CS/HB 319** requires all Florida hospitals and ambulatory surgical centers to conduct and publish patient safety culture surveys, and requires hospitals to provide quality report cards to patients.
- The bill requires the Agency for Health Care Administration to develop patient safety culture surveys for hospitals and ambulatory surgical centers to measure aspects of patient safety culture.
 - The surveys will cover frequency of adverse events, quality of handoffs and transitions, comfort in reporting a potential problem or error, the level of teamwork within hospital units and the facility as a whole, staff compliance with patient safety regulations and guidelines, staff's perception of facility support for patient safety, and staff's opinions on whether or not they would undergo a health care service or procedure at the facility.
 - When published, the survey data will help Floridians make decisions about which facilities are best for their own care and that of their families.
- The bill also requires hospitals to provide patients the hospital's quality data for its 15-day readmission rate, rate of hospital acquired infections, and patient safety satisfaction survey results. The bill requires hospitals to present the data in writing to patients upon admission or non-emergency care scheduling or prior to treatment, and to give the date to any other person upon request.
 - Additionally, the bill requires hospitals to provide an explanation of the quality measures and the relationship between the hospital's quality measure data and patient safety.
- This bill will empower patients and compel health care facilities to improve healthcare quality for all Floridians.
- Hospitals should provide consumers and patients with the quality performance information they need to make better healthcare choices.



CS/HB 813 Hospital Observation Status

- **CS/HB 813** requires hospitals to inform a patient immediately when the patient is placed on observation status.
- Florida law currently requires hospitals to notify patients of their observation status in the patient's discharge papers - that is, when leaving the hospital. Federal law requires hospitals to provide a notice to patients when observation status services last more than 24 hours, but before 36 hours. The hospital must provide the notice to the patient if the patient is discharged, transferred or admitted before 36 hours.
- The bill requires hospitals to immediately give patients written notice of their observation status. The bill requires hospitals to use the federal Medicare Outpatient Observation Notice form for Medicare patients, and a form created by the Agency for Health Care Administration for the non-Medicare patients.
- Observation status can increase patient costs for a hospital stay and later nursing home care. Consumers should know the financial impact of healthcare decisions that affect them.



CS/HB 207 Impact Fees

- Impact fees are imposed by local governments to fund local infrastructure needed to meet the demands of population growth caused by development.
- **CS/HB 207** prohibits any local government from requiring payment of impact fees any time prior to issuing a building permit.
- The bill codifies the dual rational nexus test, which requires impact fees to bear a connection both to the need for additional capital facilities and to the expenditure of funds collected and the benefits accruing to the new construction.
- The bill requires local governments to designate the funds collected by the impact fees for acquiring, constructing, or improving the capital facilities to benefit the new users.
- Impact fees collected by a local government may not be used to pay existing debt or pay for prior approved projects unless such expenditure has a rational nexus to the impact generated by the new construction.
- The bill delays when impact fees are collected, but it does not affect the amount that may be collected; thus, it does not restrict the amount of revenue local governments may raise nor require they expend additional funds.